

error. The latest available payment source data and percent discharged dead for the United States are for 1979; all other data in Table 3 are for 1980.

Table 3 shows that about 60 out of every 100 discharges are to females, both in North Carolina and the United States. When deliveries are excluded, the percent of discharges to females drops to around 50. North Carolina had a higher percent of discharges to nonwhites in 1980, (assuming that "not reported" for the United States is proportionately distributed between the two race groups), as would be expected since North Carolina has a higher percent of total population that is nonwhite. Reporting of race on the medical records appears to be much better in North Carolina than in the United States sample of discharges. The distribution of discharges by age is similar for North Carolina and the United States, though North Carolina shows a smaller percent 65 and over, consistent with its lower percent 65 and over in the total population. North Carolina discharge rates are lower than those for the United States for all sex, race, and age groups shown in this table, generally around 10 percent lower. Nonwhites have a rate of discharge from general hospitals around 15 percent lower than that for whites, both in North Carolina and the United States, while male rates are about 30 percent lower than those for females (including deliveries). The percent discharged dead is slightly higher in North Carolina, though this difference is not statistically significant due to sampling variability for the United States figure.

The payment source information in Table 3 shows similarities between the United States and North Carolina, except that North Carolina has higher percents Medicare and self pay and a lower percent Medicaid. The difference for Medicare is not statistically significant, and the percents would probably be about equal if the United States number were updated to 1980 based on the recent trend. But it is curious that North Carolina shows a similar percent Medicare since its percent of total population age 65 and over in 1980 was 10.3 compared to 11.3 for the United States. Further examination, however, reveals that in 1979 13.7 percent of Medicare enrollees in North Carolina were disabled compared to 10.5 percent for the United States. Since the disabled have a substantially higher rate of hospitalization than the aged, this higher percent disabled probably results in more total Medicare discharges than would be the case if North Carolina had the same percent disabled as the United States.

Table 4 compares North Carolina in 1978 and 1980 with the United States in 1980 with regard to selected diagnostic categories. The data in Table 2 suggest that October was a representative month in 1978 for some indicators, and total October 1978 discharges multiplied times 12 is only about one percent different from the total discharges for the year reported to the Division of Facility Services. Yet when those annualized data are broken out in detail, as for diagnostic categories, problems with representativeness will be encountered. Though there are some problems, the October 1978 annualized rates have been included in Table 4 for purposes of comparison, more for assessing representativeness than for assessing trends.

Table 4 also shows consistently higher 1980 discharge rates for the United States when compared to North Carolina. For total discharges the United States rate is about 13 percent higher. The only exceptions are for "symptoms and ill-defined conditions," where North Carolina's much higher rate may in part reflect a difference in the reporting of definitive diagnoses, and for diseases of the genitourinary system where the North Carolina and United States rates are about equal. For cerebrovascular disease and diseases of the digestive system the United States rate is less than 10 percent higher than that for North Carolina.